

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

6-32-01  
08-13-01  
1018101  
Best Available Copy

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
= ..... Allowed I ..... Interference  
— (Through numeral)... Canceled A ..... Appeal  
÷ ..... Restricted O ..... Objected

Claim	Date
Final	4/2/01
Original	
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Claim	Date
Final	5/1/2/01
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

(25)  
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